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From: Gordon & Jacobson

Subject: Verification of Attorney Information

Comments: Attached please find Verification of Attorney Information documents for 8 separate patent applications. Please forward then to the appropriate offices. Thank you for your prompt attention to this matter.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Venkataramana Vijay et al.

Group Art Unit: 3738

Serial No.: 10/617,609

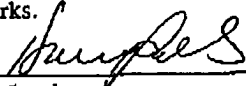
Examiner:

Filed: July 11, 2003

Attorney Docket: VIJ-003B

Title: Heart Failure Mitral Annuloplasty Ring with Multiple Sets of Suture Indicia

I hereby certify that this correspondence is being facsimile transmitted on this day to fax number (703) 872-8306 to the Commissioner of Patents and Trademarks.


David S. Jacobson
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Date


Honorable Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Sir:

REQUEST VERIFICATION OF ATTORNEY INFORMATION

This is to hereby request that the attorney information be verified such that the attorneys listed in the PALM System match the attorneys named on the declaration, and correspond to our customer number, 36822. This will ensure that all future correspondence will be forwarded to the correct address and allow the appointed attorneys access to the private PAIR System.

Respectfully submitted,


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